



**MULTICULTURAL VETERINARY
MEDICAL ASSOCIATION**

Response to WSAVA's Guidelines for the Control of Reproduction in Dogs and Cats

In May 2024, the World Small Animal Veterinary Association (WSAVA) released the "WSAVA Guidelines for the Control of Reproduction in Dogs and Cats."¹ These guidelines ultimately advise veterinarians to make spay and neuter recommendations based on whether they believe the client is a "responsible pet owner" or not, basing one's recommendations not on the data but rather on individual biases. Plainly speaking, this recommendation encourages veterinarians to discern whether an owner can be trusted to manage their pet's behavior responsibly if sterilization is delayed or avoided. While it is beyond the scope of the Multicultural Veterinary Medical Association (MCVMA) to provide an in-depth scientific critique of the document, we encourage readers to engage with the guidelines thoughtfully and critically. It is essential to consider the broader body of research beyond theriogenology, while factoring in the pressing issues of limited access to veterinary care, rising costs, and the realities faced by underserved communities. A comprehensive and inclusive perspective that accounts for all available data and the lived experiences on the ground is crucial in addressing these complex challenges effectively.

What does fall within the scope of MCVMA is to address the Eurocentric and class-biased perspective presented in these guidelines. The 136-page document references "responsible pet ownership" 25 times but fails to provide a clear, objective definition, leaving it up to veterinarians to make a subjective judgment. In an interview with VIN News Service, Dr. Romagnoli, one of the guideline's authors, acknowledged this ambiguity, stating, "There is no golden rule for that...There is no way you can definitely, clearly, and straightforwardly say what a responsible pet owner is. We thought a lot about this issue because we knew it was going to be controversial...A veterinarian must take at least some of this responsibility because we all deal with different owners and, with time, develop a sensitivity for discriminating who can be a responsible person. So if a veterinarian is unsure about a client's responsibility, they can simply assume the client is not and give advice accordingly."²

This approach essentially encourages veterinarians to make recommendations based on personal biases. The literature in human medicine has long demonstrated that racism and implicit bias have wide-ranging negative impacts on patient health and well-being. For example, in an extensive review of racism in the nurse-patient

relationship, it was summarized that, “racism is the main cause of the patient’s harm.”³ It was also found in this review that an incident of racism with a nurse caused patients to distrust the whole health care system and eroded the relationship with that patient and non-racist nurses.⁴ Schnierle et al. found that implicit bias can lead providers to unintentionally make assumptions about patients, such as expecting poorer compliance with treatment or dismissing symptoms based on socioeconomic status or race.^{5,6} Even if these biases conflict with their explicit beliefs, they can still negatively affect health outcomes and exacerbate disparities.⁵ Ultimately, the research finds that persons in racial and ethnic minority groups were found to receive lower-quality health care than whites received, even when they were insured to the same degree and when other health care access-related factors, such as the ability to pay for care, were the same.^{7,8} In a field already lacking in ethnic, racial, and gender diversity,^{9–11} the WSAVA’s “responsible pet owner” recommendation will disproportionately label BIPOC (Black, Indigenous, and people of color), marginalized, rural, unhoused, and low-income pet owners as “irresponsible.” Such a practice reinforces existing disparities in pet ownership by race, ethnicity, and socioeconomic status, further marginalizing communities that are already underserved by the veterinary profession. It’s crucial to note that studies claiming race or ethnicity influence spay/neuter decisions have historically relied on biased sampling, opaque data analysis, or non-validated survey instruments.^{12–17} Conversely, other research has shown that structural barriers—such as cost and accessibility—are the primary factors limiting access to veterinary care, not race or ethnicity.^{18–22}

Additionally, the AVMA’s most recent Pet Ownership and Demographics Sourcebook (which, notably, no longer reports racial demographic data but instead categorizes “types” of pet owners) found that the “pampered pets” segment (characterized by a willingness to spend on high-quality care) included both those earning under \$25k and over \$200k per year. This finding underscores that income level alone does not predict how much pet owners are willing to invest in their pets’ care.²³ Notably, the AVMA’s 2017-2018 Pet Ownership and Demographic Sourcebook which did include racial demographic data found that the human-animal bond is strong across race, class, and ethnicity.²⁴ Such data challenges the notion that veterinarians can accurately “identify” responsible pet ownership based on surface-level characteristics.

Furthermore, the guidelines fail to address important topics such as the increased costs of spaying/neutering large-breed dogs as they mature, or the consequences of delaying these procedures, which can lead to preventable surgical emergencies like pyometra, dystocias, or mammary tumors. These omissions leave critical gaps in understanding the financial and medical realities pet owners face. This is compounded by the veterinary field’s emphasis on “gold standard” treatments, often at the expense of recognizing the spectrum of care approach as a legitimate and often necessary approach. The “gold standard” concept is deeply ingrained in veterinary students and veterinarians, who grapple with the pressure of delivering top-tier care for every patient.

This can leave them fearful of legal repercussions if they cannot provide the highest standard of care and reinforces the problematic notion of “responsible pet ownership.”

The guidelines were authored by six veterinarians, including two from Europe, two from the United States, one from Australia, and one from South Africa—all of whom present as white and are based in countries that are part of the Global North. Moreover, while the majority are specialists in animal reproduction, the team notably lacked representation from other critical fields such as animal welfare, shelter medicine, epidemiology, public health, or access to care. The absence of diverse perspectives and experiences has resulted in significant blind spots, especially regarding the social aspects of the issue. As a result, the guidelines come across as reflecting a Eurocentric, class-biased perspective, giving the impression that data was selectively used to promote a specific agenda, even if that was not the authors' intention. This is particularly concerning given WSAVA's role as an international organization that wields significant influence in the field of veterinary medicine. As a respected authority, WSAVA's recommendations are likely to be followed by veterinarians worldwide, impacting standards of care and decision-making practices across diverse regions and communities.

The MCVMA urges the WSAVA, veterinary medical institutions, and all readers of these guidelines to not only critically reflect on these concerns, but to go further by acknowledging this as an opportunity to dismantle the structural racism, classism, and biases that have long plagued veterinary medicine. Structural barriers, such as redlined neighborhoods without veterinary clinics, animal protection ordinances that are over enforced in marginalized communities, and lack of pet friendly housing, have created vast access-to-care deserts, preventing many pet owners from providing the care they want for their pets. Misinterpreting these challenges as “irresponsible pet ownership” perpetuates harmful stereotypes that have long been a problem in veterinary medicine. We call on veterinary institutions to recognize their role in upholding these structural biases and reconstruct not only how veterinary medicine has historically defined but also approached the concept of responsible pet ownership, moving away from merely disparaging pet owners who are not perceived as “responsible.” It is time for the field to shift away from outdated, subjective judgments toward a more inclusive and supportive approach—one that prioritizes interventions to help underserved families and individuals. Such an approach would ensure that those who might otherwise be unfairly labeled as “irresponsible” receive the support they need to overcome the barriers preventing access to the veterinarian-recommended care they both want and need. By realigning our understanding of responsible pet ownership, we can better serve the well-being of both pets and their families.

To help shift the conversation, we have linked a resource on systems framing in animal welfare [here](#).²⁵ This narrative tool is vital for changing how we speak and think about these issues, enabling us to start dismantling the structural barriers that prevent equitable access to veterinary care.

1. Romagnoli S, Krekeler N, dr Cramer K, Kutzler M, McCarthy R, Schaefer-Somi S. WSAVA guidelines for the control of reproduction in dogs and cats - Romagnoli - 2024 - Journal of Small Animal Practice - Wiley Online Library. *Journal of Small Animal Practice*. 2024;65(7):424-559.
2. Romagnoli S. Co-creator outlines case for new WSAVA neutering guide. Published online August 1, 2024. Accessed November 11, 2024. <https://news.vin.com/default.aspx?pid=210&catId=6958&Id=12211424>
3. Vaismoradi M, Fredriksen Moe C, Ursin G, Ingstad K. Looking through racism in the nurse–patient relationship from the lens of culturally congruent care: A scoping review. *Journal of Advanced Nursing*. 2022;78(9):2665-2677. doi:10.1111/jan.15267
4. Benkert R, Hollie B, Nordstrom CK, Wickson B, Bins-Emerick L. Trust, mistrust, racial identity and patient satisfaction in urban African American primary care patients of nurse practitioners. *J Nurs Scholarsh*. 2009;41(2):211-219. doi:10.1111/j.1547-5069.2009.01273.x
5. Schnierle J, Christian-Brathwaite N, Louisias M. Implicit Bias: What Every Pediatrician Should Know About the Effect of Bias on Health and Future Directions. *Current problems in pediatric and adolescent health care*. 2019;49(2):34. doi:10.1016/j.cppeds.2019.01.003
6. Ryn M van, Fu SS. Paved With Good Intentions: Do Public Health and Human Service Providers Contribute to Racial/Ethnic Disparities in Health? *American Journal of Public Health*. 2003;93(2):248. doi:10.2105/ajph.93.2.248
7. Stubbe DE. Practicing Cultural Competence and Cultural Humility in the Care of Diverse Patients. *FOC*. 2020;18(1):49-51. doi:10.1176/appi.focus.20190041
8. Institute of Medicine (US) Committee on Understanding and Eliminating Racial and Ethnic Disparities in Health Care. *Unequal Treatment: Confronting Racial and Ethnic Disparities in Health Care*. (Smedley BD, Stith AY, Nelson AR, eds.). National Academies Press (US); 2003. Accessed March 20, 2020. <http://www.ncbi.nlm.nih.gov/books/NBK220358/>
9. U.S. veterinarian numbers | American Veterinary Medical Association. Accessed November 10, 2024. <https://www.avma.org/resources-tools/reports-statistics/market-research-statistics-us-veterinarians>
10. Layne J. Veterinarian Statistics. Statistic Hub. January 10, 2024. Accessed November 10, 2024. <https://medium.com/statistic-hub/veterinarian-statistics-0c047067929b>
11. Envisioning A More Equitable Future For Veterinary Medicine And Care | Ontario Veterinary College. Accessed November 11, 2024. <https://ovc.uoguelph.ca/news/node/1478>

12. Chu K, Anderson WM, Rieser MY. Population characteristics and neuter status of cats living in households in the United States. Published online April 15, 2009. doi:10.2460/javma.234.8.1023
13. Baumann MR. *San Antonio Animal Care Services Project 2007: Summary Findings & Related Policy Implications*. https://webapps1.sanantonio.gov/rfcdocs/R_2064_20070810092030.pdf
14. Faver CA. Sterilization of Companion Animals: Exploring the Attitudes and Behaviors of Latino Students in South Texas. *Journal of Applied Animal Welfare Science*. 2009;12(4):314-330. doi:10.1080/10888700903163534
15. Landau RE, Beck A, Glickman LT, Litster A, Widmar NJO, Moore GE. Use of veterinary services by Latino dog and cat owners with various degrees of English-language proficiency. Published online March 15, 2016. doi:10.2460/javma.248.6.681
16. Risley-Curtiss C, Holley LC, Wolf S. The Animal-Human Bond and Ethnic Diversity. *Social Work*. 2006;51(3):257-268. doi:10.1093/sw/51.3.257
17. Schoenfeld-Tacher R, Kogan LR, Wright ML. Comparison of strength of the human-animal bond between Hispanic and non-Hispanic owners of pet dogs and cats. Published online March 1, 2010. doi:10.2460/javma.236.5.529
18. Decker Sparks JL, Camacho B, Tedeschi P, Morris KN. Race and ethnicity are not primary determinants in utilizing veterinary services in underserved communities in the United States. *Journal of Applied Animal Welfare Science*. 2018;21(2):120-129. doi:10.1080/10888705.2017.1378578
19. Poss JE, Bader JO. Attitudes Toward Companion Animals Among Hispanic Residents of a Texas Border Community. *Journal of Applied Animal Welfare Science*. 2007;10(3):243-253. doi:10.1080/10888700701353717
20. Park RM, Gruen ME, Royal K. Association between Dog Owner Demographics and Decision to Seek Veterinary Care. *Veterinary Sciences*. 2021;8(1):7. doi:10.3390/vetsci8010007
21. Dolan ED, Scotto J, Slater M, Weiss E. Risk Factors for Dog Relinquishment to a Los Angeles Municipal Animal Shelter. *Animals*. 2015;5(4):1311-1328. doi:10.3390/ani5040413
22. Hawes SM, Hupe T, Morris KN. Punishment to Support: The Need to Align Animal Control Enforcement with the Human Social Justice Movement. *Animals*. 2020;10(10):1902. doi:10.3390/ani10101902
23. American Veterinary Medical Association. *AVMA 2022 Pet Ownership and Demographic Sourcebook*.; 2022. Accessed April 8, 2024. <https://ebusiness.avma.org/ProductCatalog/product.aspx?ID=2050>

24. American Veterinary Medical Association. *2017-2018 AVMA Pet Ownership and Demographic Sourcebook.*; 2019.
25. Lentz, Hanna. 2024. *Systems Framing for Animal Care and Well-being. Supporting People & Animal Relationships for Change*; SPARC.